FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires July 31, 2002

Important: Read the instructions on pages 1 - 7.

SECTIO		For Insurance Company Use:				
BUILDING OWNER'S NAME FRED WILLIAMS HOMEBUILDER, INC		Policy Number				
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. RCUTE AND BOX NO. 186 SILVERTON ROAD			Company NAIC Number			
CITY POOLER	STATE ZIP CODE GA 31322					
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, LOT 73 STONEWATER PHASE 2	Legal Description, etc.)					
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Residential	Use Comments section if necessary.)					
LATTIUDE/LONGITUDE (OPTIONAL) HORIZONTAL DA	TUM: SOURCE: [] GPS (Type):				
(## - ## - ## - ## man or ## #####) NAD 1927] Other:			
SECTION B - F	LOOD INSURANCE RATE MAP (FIRM) INFO	RMATION				
B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER 130261 POOLER	E2 CCUNTY NAME CHATHAM	B3. GA	STATE			
B4. MAP AND PANEL B5. SUFFIX B6. FIRM INDEX 9:40-95 C	EFFECTIVE/REVISED DATE 5-19-87	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 13.0			
B10. Indicate the source of the Base Flood Elevation (BFE) data or b ☐ FIS Profile ☐ FIRM ☐ Communit B11. Indicate the elevation datum used for the BFE in B9: ☐ NGVE B12. Is the building located in a Coastal Barrier Resources System (y Determined Other (Describ 1929 NAVD 1988	Other (Describe):	esianation Date			
	DING ELEVATION INFORMATION (SURVE		<u></u>			
^1 Building elevations are based on: ☐ Construction Drawings*		Finished Construction				
*A new Elevation Certificate will be required when construction of	f the building is complete.					
C2. Building Diagram Number 1 (Select the building diagram most si	_	eing completed - see page	s 6 and 7. If no diagram			
accurately represents the building, provide a sketch or photogra		DIAU ADIAO				
C3. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO Complete Items C3a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in						
Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of						
Section D or Section G, as appropriate, to document the datum						
Datum Conversion/Comments						
Elevation reference mark usedDoes the elevation refere	nce mark used appear on the FIRM? Yes					
a) Top of bottom floor (including basement or enclosure)	<u>18</u> . <u>7</u> ft (m)	oossed Seal, Date	000			
b) Top of next higher floor	<u>N/A</u> ft.(m)	d Sc	CE COLOR			
c) Bottom of lowest horizontal structural member (V zones or	ly) <u>N/A</u> ft(m))) ale	1 Charles 18 18 18			
d) Attached garage (top of slab)	<u>18</u> . <u>2</u> fL(m)	a B	1 V V // × // V . II			
e) Lowest elevation of machinery and/or equipment		д. П. в.	1 146. 2509\ 7 * 1			
servicing the building	<u>N/A</u> ft(m)	ag ag M	12/ 11/2			
f) Lowest adjacent grade (LAG)	<u>17</u> . 9ft (m)	N Pigi Sign	3200 m/200 m			
g) Highest adjacent grade (HAG)	<u>18</u> . <u>1</u> ft.(m)	License Number, Emb Signature, and	55			
h) No. of permanent openings (flood vents) within 1 ft. above	adjacent grade <u>W</u>	Lice	ACL A. HO			
i) Total area of all permanent openings (flood vents) in C3h N	<u>//A</u> sq. in. (sq. cm)					
SECTION D - SU	RVEYOR, ENGINEER, OR ARCHITECT CEF	RTIFICATION				
This certification is to be signed and sealed by a land survey			nation.			
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.						
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001: CERTIFIER'S NAME Michael A. Hussey LICENSE NUMBER 2509						
TLELand Surveyor	COMPANY NAME	GOEINGE HOWBER 2009				
ADDRESS .	CITY	07.47	710 0005			
8307 Meadowbryok Road	Savannah	STATE GA	ZIP CODE 31406			
SIGNATURE	DATE	TELEPHO	NE			
17.12	nenon4	012.354.25	19.5			

	corresponding information from Section A.			For Insurance Company Use;			
BUILDING STREET ADDRESS (Including Apt., Un No 186 SILVERTON ROAD	nit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND B	OX NO.		Policy Number			
CITY SOLER	STATE GA		ZIP CODE - 31322	Company NAIC Number			
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)							
Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.							
COMMENTS							
N/A							
SECTION E PUIL DING	ELEVATION INFORMATION (SURVEY NO	T DECUIDE	DI FOR ZONE AO AND ZONE A	Check here if attachments			
For Zone AO and Zone A (without BFE), comp				the state of the s			
Section C must be completed.	iete kens E1 tilough E4. If the Elevatori Car	uncate is inter	idea for use as supporting informa	BOTTOL & LOWA OF LOWIN-,			
E1. Building Diagram Number _(Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)							
E2. The top of the bottom floor (including baser	E2. The top of the bottom floor (including basement or enclosure) of the building isft.(m)in.(cm) above or below (check one) the highest adjacent grade.						
E3. For Building Diagrams 6-8 with openings (s	see page 7), the next higher floor or elevated fl	oor (elevation	b) of the building isft.(m)ir	n.(cm) above the highest adjacent			
grade. E4. For Zone AO only: If no flood depth numb	er is available, is the top of the bottom floor ele	vated in acco	rdance with the community's flood	olain management ordinanco?			
E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance? Yes No Unknown. The local official must certify this information in Section G.							
SE	CTION F - PROPERTY OWNER (OR OWNE	R'S REPRES	SENTATIVE) CERTIFICATION				
The property owner or owner's authorized repsign here.	oresentative who completes Sections A, B, and	d E for Zone A	A (without a FEMA-issued or comm	nunity-issued BFE) or Zone AO must			
PROPERTY OWNER'S OR OWNER'S AUTHOR	IZED DEDDECENTATIVE'S MANGE						
	KED KEPKESENTATIVE SINAME						
DRESS		СПҮ	STATI	ZIP CODE			
SIGNATURE		DATE	TELE	PHONE			
COMMENTS	X E) = 0 +		a .	a ≈ 16°			
				Check here if attachments			
	SECTION G - COMMUNITY INF	ORMATION	(OPTIONAL)				
The local official who is authorized by law or on		ain managem	ent ordinance can complete Section	ons A, B, C (or E), and G of this Elevation			
Certificate. Complete the applicable item(s) an			11 19 1				
G1. The information in Section C was taken state or local law to certify elevation in				neer, or architect who is authorized by			
state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.) G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.							
G3. The following information (Items G4-G							
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFICATE OF COM	PLIANCE/OCCUPANCY ISSUED			
G7. This permit has been issued for. New	·						
G8. Elevation of as-built lowest floor (including			ft_(m)	Datum:			
G9. BFE or (in Zone AO) depth of flooding at the	ie building site is:		ft.(m)	Datum:			
LOCAL OFFICIAL'S NAME		TITL	<u>E</u>				
COMMUNITY NAME	OMMUNITY NAME TELEPHONE						
SIGNATURE		DAT	E ,	a			
COMMENTS							
	u i						
/							
				Check here if attachments			